

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
San Bernardino County Safety Employees Benefit Association Federal PAC

ADDRESS (number and street) 735 E. Carnegie Dr.
Ste. 125
 Check if different than previously reported. (ACC)
San Bernardino CA 92408

2. **FEC IDENTIFICATION NUMBER** C00408344
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report(Q1)
 July 15 Quarterly Report(Q2)
 October 15 Quarterly Report(Q3)
 January 31 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE-Election** Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12G)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 10 01 2007 through 12 31 2007

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Type or Print Name of Treasurer William Abernathie
Signature of Treasurer Electronically Filed by William Abernathie Date 01 14 2007

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office Use Only

FEC FORM 3X
(Rev. 12/2004)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
San Bernardino County Safety Employees Benefit Association Federal PAC

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	Y	Y	Y	Y	2	0	0	7		6684.55
Y	Y	Y	Y							
2	0	0	7							
(b) Cash on Hand at Beginning of Reporting Period	9952.61									
(c) Total Receipts (from Line 19)	1323.48	5371.84								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	11276.09	12056.39								
7. Total Disbursements (from Line 31)	600.00	1380.30								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	10676.09	10676.09								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name

San Bernardino County Safety Employees Benefit Association Federal PAC

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	7

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	920.00	1080.00
(i) Itemized (use Schedule A)		
(ii) Unitemized	400.00	4275.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	1320.00	5355.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	1320.00	5355.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	3.48	16.84
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	1323.48	5371.84
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	1323.48	5371.84

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	500.00	1000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	100.00	380.30
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	600.00	1380.30
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	600.00	1380.30

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	1320.00	5355.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1320.00	5355.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 36
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
San Bernardino County Safety Employees Benefit Association Federal PAC

A.	Full Name (Last, First, Middle Initial) William Abernathie	Date of Receipt MM / DD / YYYY 11 / 08 / 2007
	Mailing Address 735 E. Carnegie Dr. Ste. 125	Transaction ID: SA11AI.5434
	City State Zip Code San Bernardino CA 92408	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	Payroll deduction
	Name of Employer County of San Bernardino Occupation Public Safety Official Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00	

B.	Full Name (Last, First, Middle Initial) William Abernathie	Date of Receipt MM / DD / YYYY 11 / 22 / 2007
	Mailing Address 735 E. Carnegie Dr. Ste. 125	Transaction ID: SA11AI.5435
	City State Zip Code San Bernardino CA 92408	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	Payroll deduction
	Name of Employer County of San Bernardino Occupation Public Safety Official Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 220.00	

C.	Full Name (Last, First, Middle Initial) William Abernathie	Date of Receipt MM / DD / YYYY 12 / 06 / 2007
	Mailing Address 735 E. Carnegie Dr. Ste. 125	Transaction ID: SA11AI.5436
	City State Zip Code San Bernardino CA 92408	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	Payroll deduction
	Name of Employer County of San Bernardino Occupation Public Safety Official Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 230.00	

SUBTOTAL of Receipts This Page (optional)	30.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 36
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
San Bernardino County Safety Employees Benefit Association Federal PAC

A. Full Name (Last, First, Middle Initial)
William Abernathie

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City San Bernardino State CA Zip Code 92408

FEC ID number of contributing federal political committee. **C**

Name of Employer County of San Bernardino Occupation Public Safety Official

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 12 / 20 / 2007
Transaction ID: SA11AI.5437
Amount of Each Receipt this Period 10.00
Payroll deduction

B. Full Name (Last, First, Middle Initial)
Paul Amicone

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City San Bernardino State CA Zip Code 92408

FEC ID number of contributing federal political committee. **C**

Name of Employer County of San Bernardino Occupation Public Safety Official

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 11 / 08 / 2007
Transaction ID: SA11AI.5440
Amount of Each Receipt this Period 10.00
Payroll deduction

C. Full Name (Last, First, Middle Initial)
Paul Amicone

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City San Bernardino State CA Zip Code 92408

FEC ID number of contributing federal political committee. **C**

Name of Employer County of San Bernardino Occupation Public Safety Official

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 22 / 2007
Transaction ID: SA11AI.5441
Amount of Each Receipt this Period 10.00
Payroll deduction

SUBTOTAL of Receipts This Page (optional) ► 30.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 36
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
San Bernardino County Safety Employees Benefit Association Federal PAC

<p>A. Full Name (Last, First, Middle Initial) Paul Amicone</p> <p>Mailing Address 735 E. Carnegie Dr. Ste. 125</p> <p>City State Zip Code San Bernardino CA 92408</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer County of San Bernardino Occupation Public Safety Official</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 230.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 6 / 2 0 0 7</p> <p>Transaction ID: SA11AI.5442</p> <p>Amount of Each Receipt this Period 10.00</p> <p>Payroll deduction</p>
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<p>B. Full Name (Last, First, Middle Initial) Paul Amicone</p> <p>Mailing Address 735 E. Carnegie Dr. Ste. 125</p> <p>City State Zip Code San Bernardino CA 92408</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer County of San Bernardino Occupation Public Safety Official</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 240.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 2 / 2 0 / 2 0 0 7</p> <p>Transaction ID: SA11AI.5443</p> <p>Amount of Each Receipt this Period 10.00</p> <p>Payroll deduction</p>
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<p>C. Full Name (Last, First, Middle Initial) Sebastian Barnes</p> <p>Mailing Address 735 E. Carnegie Dr. Ste. 125</p> <p>City State Zip Code San Bernardino CA 92408</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer County of San Bernardino Occupation Public Safety Official</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 210.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 8 / 2 0 0 7</p> <p>Transaction ID: SA11AI.5446</p> <p>Amount of Each Receipt this Period 10.00</p> <p>Payroll deduction</p>
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SUBTOTAL of Receipts This Page (optional)	30.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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FOR LINE NUMBER: PAGE 9 / 36
(check only one)
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 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
San Bernardino County Safety Employees Benefit Association Federal PAC

A. Full Name (Last, First, Middle Initial)
Sebastian Barnes

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City San Bernardino State CA Zip Code 92408

FEC ID number of contributing federal political committee. **C**

Name of Employer County of San Bernardino Occupation Public Safety Official

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 22 / 2007
Transaction ID: SA11AI.5447
Amount of Each Receipt this Period 10.00
Payroll deduction

B. Full Name (Last, First, Middle Initial)
Sebastian Barnes

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City San Bernardino State CA Zip Code 92408

FEC ID number of contributing federal political committee. **C**

Name of Employer County of San Bernardino Occupation Public Safety Official

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt 12 / 06 / 2007
Transaction ID: SA11AI.5448
Amount of Each Receipt this Period 10.00
Payroll deduction

C. Full Name (Last, First, Middle Initial)
Sebastian Barnes

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City San Bernardino State CA Zip Code 92408

FEC ID number of contributing federal political committee. **C**

Name of Employer County of San Bernardino Occupation Public Safety Official

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 12 / 20 / 2007
Transaction ID: SA11AI.5449
Amount of Each Receipt this Period 10.00
Payroll deduction

SUBTOTAL of Receipts This Page (optional) ► 30.00

TOTAL This Period (last page this line number only) ►

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 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
San Bernardino County Safety Employees Benefit Association Federal PAC

A. Full Name (Last, First, Middle Initial)
Robert Boone

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City San Bernardino State CA Zip Code 92408

FEC ID number of contributing federal political committee. **C**

Name of Employer County of San Bernardino Occupation Public Safety Official

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 11 / 08 / 2007
Transaction ID: SA11AI.5452
Amount of Each Receipt this Period 10.00
Payroll deduction

B. Full Name (Last, First, Middle Initial)
Robert Boone

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City San Bernardino State CA Zip Code 92408

FEC ID number of contributing federal political committee. **C**

Name of Employer County of San Bernardino Occupation Public Safety Official

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 22 / 2007
Transaction ID: SA11AI.5453
Amount of Each Receipt this Period 10.00
Payroll deduction

C. Full Name (Last, First, Middle Initial)
Robert Boone

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City San Bernardino State CA Zip Code 92408

FEC ID number of contributing federal political committee. **C**

Name of Employer County of San Bernardino Occupation Public Safety Official

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt 12 / 06 / 2007
Transaction ID: SA11AI.5454
Amount of Each Receipt this Period 10.00
Payroll deduction

SUBTOTAL of Receipts This Page (optional) ► 30.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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FOR LINE NUMBER: PAGE 11 / 36
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 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
San Bernardino County Safety Employees Benefit Association Federal PAC

A. Full Name (Last, First, Middle Initial)
Robert Boone

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City San Bernardino State CA Zip Code 92408

FEC ID number of contributing federal political committee. **C**

Name of Employer County of San Bernardino Occupation Public Safety Official

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 12 / 20 / 2007

Transaction ID: SA11AI.5455

Amount of Each Receipt this Period 10.00

Payroll deduction

B. Full Name (Last, First, Middle Initial)
Sherry Eversole-Patterson

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City San Bernardino State CA Zip Code 92408

FEC ID number of contributing federal political committee. **C**

Name of Employer County of San Bernardino Occupation Public Safety Official

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 11 / 08 / 2007

Transaction ID: SA11AI.5458

Amount of Each Receipt this Period 10.00

Payroll deduction

C. Full Name (Last, First, Middle Initial)
Sherry Eversole-Patterson

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City San Bernardino State CA Zip Code 92408

FEC ID number of contributing federal political committee. **C**

Name of Employer County of San Bernardino Occupation Public Safety Official

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 22 / 2007

Transaction ID: SA11AI.5459

Amount of Each Receipt this Period 10.00

Payroll deduction

SUBTOTAL of Receipts This Page (optional) ► 30.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
San Bernardino County Safety Employees Benefit Association Federal PAC

A.	Full Name (Last, First, Middle Initial) Sherry Eversole-Patterson	Date of Receipt MM / DD / YYYY 12 / 06 / 2007
	Mailing Address 735 E. Carnegie Dr. Ste. 125	Transaction ID: SA11AI.5460
	City State Zip Code San Bernardino CA 92408	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	Payroll deduction
	Name of Employer County of San Bernardino Occupation Public Safety Official Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 230.00	

B.	Full Name (Last, First, Middle Initial) Sherry Eversole-Patterson	Date of Receipt MM / DD / YYYY 12 / 20 / 2007
	Mailing Address 735 E. Carnegie Dr. Ste. 125	Transaction ID: SA11AI.5461
	City State Zip Code San Bernardino CA 92408	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	Payroll deduction
	Name of Employer County of San Bernardino Occupation Public Safety Official Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00	

C.	Full Name (Last, First, Middle Initial) Daniel Finneran	Date of Receipt MM / DD / YYYY 11 / 08 / 2007
	Mailing Address 735 E. Carnegie Dr. Ste. 125	Transaction ID: SA11AI.5467
	City State Zip Code San Bernardino CA 92408	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	Payroll deduction
	Name of Employer County of San Bernardino Occupation Public Safety Official Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00	

SUBTOTAL of Receipts This Page (optional)	▶	30.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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FOR LINE NUMBER: PAGE 13 / 36
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
San Bernardino County Safety Employees Benefit Association Federal PAC

A. Full Name (Last, First, Middle Initial)
Daniel Finneran

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City San Bernardino State CA Zip Code 92408

FEC ID number of contributing federal political committee. **C**

Name of Employer County of San Bernardino Occupation Public Safety Official

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 22 / 2007
Transaction ID: SA11AI.5464
Amount of Each Receipt this Period 10.00
Payroll deduction

B. Full Name (Last, First, Middle Initial)
Daniel Finneran

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City San Bernardino State CA Zip Code 92408

FEC ID number of contributing federal political committee. **C**

Name of Employer County of San Bernardino Occupation Public Safety Official

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt 12 / 06 / 2007
Transaction ID: SA11AI.5465
Amount of Each Receipt this Period 10.00
Payroll deduction

C. Full Name (Last, First, Middle Initial)
Daniel Finneran

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City San Bernardino State CA Zip Code 92408

FEC ID number of contributing federal political committee. **C**

Name of Employer County of San Bernardino Occupation Public Safety Official

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 12 / 20 / 2007
Transaction ID: SA11AI.5466
Amount of Each Receipt this Period 10.00
Payroll deduction

SUBTOTAL of Receipts This Page (optional) ► 30.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 14 / 36						
	(check only one)							
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
San Bernardino County Safety Employees Benefit Association Federal PAC

A.	Full Name (Last, First, Middle Initial) William Forester		Date of Receipt																					
	Mailing Address 735 E. Carnegie Dr. Ste. 125		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>0</td><td>8</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	0	8	/	2	0	0	7
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	1	/	0	8	/	2	0	0	7														
	City State Zip Code San Bernardino CA 92408		Transaction ID: SA11AI.5470																					
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00																					
Name of Employer County of San Bernardino		Occupation Public Safety Official																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 210.00																						

B.	Full Name (Last, First, Middle Initial) William Forester		Date of Receipt																					
	Mailing Address 735 E. Carnegie Dr. Ste. 125		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>2</td><td>2</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	2	2	/	2	0	0	7
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	1	/	2	2	/	2	0	0	7														
	City State Zip Code San Bernardino CA 92408		Transaction ID: SA11AI.5471																					
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00																					
Name of Employer County of San Bernardino		Occupation Public Safety Official																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 220.00																						

C.	Full Name (Last, First, Middle Initial) William Forester		Date of Receipt																					
	Mailing Address 735 E. Carnegie Dr. Ste. 125		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td>/</td><td>0</td><td>6</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	0	6	/	2	0	0	7
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	2	/	0	6	/	2	0	0	7														
	City State Zip Code San Bernardino CA 92408		Transaction ID: SA11AI.5472																					
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00																					
Name of Employer County of San Bernardino		Occupation Public Safety Official																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 230.00																						

SUBTOTAL of Receipts This Page (optional)	▶	30.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 36

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

San Bernardino County Safety Employees Benefit Association Federal PAC

A.

Full Name (Last, First, Middle Initial)

William Forester

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City State Zip Code
San Bernardino CA 92408

FEC ID number of contributing federal political committee.

C

Name of Employer
County of San Bernardino

Occupation
Public Safety Official

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 0 / 2 0 0 7

Transaction ID: SA11AI.5473

Amount of Each Receipt this Period

10.00

Payroll deduction

B.

Full Name (Last, First, Middle Initial)

Brian Fratt

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City State Zip Code
San Bernardino CA 92408

FEC ID number of contributing federal political committee.

C

Name of Employer
County of San Bernardino

Occupation
Public Safety Official

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 8 / 2 0 0 7

Transaction ID: SA11AI.5476

Amount of Each Receipt this Period

10.00

Payroll deduction

C.

Full Name (Last, First, Middle Initial)

Brian Fratt

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City State Zip Code
San Bernardino CA 92408

FEC ID number of contributing federal political committee.

C

Name of Employer
County of San Bernardino

Occupation
Public Safety Official

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 2 2 / 2 0 0 7

Transaction ID: SA11AI.5477

Amount of Each Receipt this Period

10.00

Payroll deduction

SUBTOTAL of Receipts This Page (optional)

30.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 36
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
San Bernardino County Safety Employees Benefit Association Federal PAC

A. Full Name (Last, First, Middle Initial)
Brian Fratt

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City San Bernardino State CA Zip Code 92408

FEC ID number of contributing federal political committee. **C**

Name of Employer County of San Bernardino Occupation Public Safety Official

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt 12 / 06 / 2007

Transaction ID: SA11AI.5478

Amount of Each Receipt this Period 10.00

Payroll deduction

B. Full Name (Last, First, Middle Initial)
Brian Fratt

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City San Bernardino State CA Zip Code 92408

FEC ID number of contributing federal political committee. **C**

Name of Employer County of San Bernardino Occupation Public Safety Official

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 12 / 20 / 2007

Transaction ID: SA11AI.5479

Amount of Each Receipt this Period 10.00

Payroll deduction

C. Full Name (Last, First, Middle Initial)
Jason Grantham

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City San Bernardino State CA Zip Code 92408

FEC ID number of contributing federal political committee. **C**

Name of Employer County of San Bernardino Occupation Public Safety Official

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 11 / 08 / 2007

Transaction ID: SA11AI.5482

Amount of Each Receipt this Period 10.00

Payroll deduction

SUBTOTAL of Receipts This Page (optional) ► 30.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 36
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
San Bernardino County Safety Employees Benefit Association Federal PAC

A. Full Name (Last, First, Middle Initial)
Jason Grantham

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City San Bernardino State CA Zip Code 92408

FEC ID number of contributing federal political committee. **C**

Name of Employer County of San Bernardino Occupation Public Safety Official

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 22 / 2007

Transaction ID: SA11AI.5483

Amount of Each Receipt this Period 10.00

Payroll deduction

B. Full Name (Last, First, Middle Initial)
Jason Grantham

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City San Bernardino State CA Zip Code 92408

FEC ID number of contributing federal political committee. **C**

Name of Employer County of San Bernardino Occupation Public Safety Official

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt 12 / 06 / 2007

Transaction ID: SA11AI.5484

Amount of Each Receipt this Period 10.00

Payroll deduction

C. Full Name (Last, First, Middle Initial)
Jason Grantham

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City San Bernardino State CA Zip Code 92408

FEC ID number of contributing federal political committee. **C**

Name of Employer County of San Bernardino Occupation Public Safety Official

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 12 / 20 / 2007

Transaction ID: SA11AI.5485

Amount of Each Receipt this Period 10.00

Payroll deduction

SUBTOTAL of Receipts This Page (optional) ► 30.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 36
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
San Bernardino County Safety Employees Benefit Association Federal PAC

A. Full Name (Last, First, Middle Initial)
Harry Hatch

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City San Bernardino State CA Zip Code 92408

FEC ID number of contributing federal political committee. **C**

Name of Employer County of San Bernardino Occupation Public Safety Official

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 11 / 08 / 2007
Transaction ID: SA11AI.5488
Amount of Each Receipt this Period 10.00
Payroll deduction

B. Full Name (Last, First, Middle Initial)
Harry Hatch

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City San Bernardino State CA Zip Code 92408

FEC ID number of contributing federal political committee. **C**

Name of Employer County of San Bernardino Occupation Public Safety Official

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 22 / 2007
Transaction ID: SA11AI.5489
Amount of Each Receipt this Period 10.00
Payroll deduction

C. Full Name (Last, First, Middle Initial)
Harry Hatch

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City San Bernardino State CA Zip Code 92408

FEC ID number of contributing federal political committee. **C**

Name of Employer County of San Bernardino Occupation Public Safety Official

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt 12 / 06 / 2007
Transaction ID: SA11AI.5490
Amount of Each Receipt this Period 10.00
Payroll deduction

SUBTOTAL of Receipts This Page (optional) ► 30.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 36
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
San Bernardino County Safety Employees Benefit Association Federal PAC

A. Full Name (Last, First, Middle Initial)
Harry Hatch

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City San Bernardino State CA Zip Code 92408

FEC ID number of contributing federal political committee. **C**

Name of Employer County of San Bernardino Occupation Public Safety Official

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 12 / 20 / 2007

Transaction ID: SA11AI.5491

Amount of Each Receipt this Period 10.00

Payroll deduction

B. Full Name (Last, First, Middle Initial)
Edward Jimenez

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City San Bernardino State CA Zip Code 92408

FEC ID number of contributing federal political committee. **C**

Name of Employer County of San Bernardino Occupation Public Safety Official

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 11 / 08 / 2007

Transaction ID: SA11AI.5494

Amount of Each Receipt this Period 10.00

Payroll deduction

C. Full Name (Last, First, Middle Initial)
Edward Jimenez

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City San Bernardino State CA Zip Code 92408

FEC ID number of contributing federal political committee. **C**

Name of Employer County of San Bernardino Occupation Public Safety Official

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 22 / 2007

Transaction ID: SA11AI.5495

Amount of Each Receipt this Period 10.00

Payroll deduction

SUBTOTAL of Receipts This Page (optional) ► 30.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 36
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
San Bernardino County Safety Employees Benefit Association Federal PAC

A.	Full Name (Last, First, Middle Initial) Edward Jimenez		Date of Receipt MM / DD / YYYY 12 / 06 / 2007
	Mailing Address 735 E. Carnegie Dr. Ste. 125		Transaction ID: SA11AI.5496
	City San Bernardino	State CA	Zip Code 92408
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
	Name of Employer County of San Bernardino	Occupation Public Safety Official	Payroll deduction

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00
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B.	Full Name (Last, First, Middle Initial) Edward Jimenez		Date of Receipt MM / DD / YYYY 12 / 20 / 2007
	Mailing Address 735 E. Carnegie Dr. Ste. 125		Transaction ID: SA11AI.5497
	City San Bernardino	State CA	Zip Code 92408
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
	Name of Employer County of San Bernardino	Occupation Public Safety Official	Payroll deduction

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00
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C.	Full Name (Last, First, Middle Initial) Robert Johnston		Date of Receipt MM / DD / YYYY 11 / 08 / 2007
	Mailing Address 735 E. Carnegie Dr. Ste. 125		Transaction ID: SA11AI.5500
	City San Bernardino	State CA	Zip Code 92408
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
	Name of Employer County of San Bernardino	Occupation Public Safety Official	Payroll deduction

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00
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SUBTOTAL of Receipts This Page (optional)	▶	30.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 36
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
San Bernardino County Safety Employees Benefit Association Federal PAC

A. Full Name (Last, First, Middle Initial)
Robert Johnston

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City San Bernardino State CA Zip Code 92408

FEC ID number of contributing federal political committee. **C**

Name of Employer County of San Bernardino Occupation Public Safety Official

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 22 / 2007
Transaction ID: SA11AI.5502
Amount of Each Receipt this Period 10.00
Payroll deduction

B. Full Name (Last, First, Middle Initial)
Robert Johnston

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City San Bernardino State CA Zip Code 92408

FEC ID number of contributing federal political committee. **C**

Name of Employer County of San Bernardino Occupation Public Safety Official

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt 12 / 06 / 2007
Transaction ID: SA11AI.5503
Amount of Each Receipt this Period 10.00
Payroll deduction

C. Full Name (Last, First, Middle Initial)
Robert Johnston

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City San Bernardino State CA Zip Code 92408

FEC ID number of contributing federal political committee. **C**

Name of Employer County of San Bernardino Occupation Public Safety Official

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 12 / 20 / 2007
Transaction ID: SA11AI.5504
Amount of Each Receipt this Period 10.00
Payroll deduction

SUBTOTAL of Receipts This Page (optional) ► 30.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 36
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
San Bernardino County Safety Employees Benefit Association Federal PAC

A. Full Name (Last, First, Middle Initial)
Laren Leichter

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City San Bernardino State CA Zip Code 92408

FEC ID number of contributing federal political committee. **C**

Name of Employer County of San Bernardino Occupation Public Safety Official

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 11 / 08 / 2007
Transaction ID: SA11AI.5508
Amount of Each Receipt this Period 10.00
Payroll deduction

B. Full Name (Last, First, Middle Initial)
Laren Leichter

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City San Bernardino State CA Zip Code 92408

FEC ID number of contributing federal political committee. **C**

Name of Employer County of San Bernardino Occupation Public Safety Official

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 22 / 2007
Transaction ID: SA11AI.5510
Amount of Each Receipt this Period 10.00
Payroll deduction

C. Full Name (Last, First, Middle Initial)
Laren Leichter

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City San Bernardino State CA Zip Code 92408

FEC ID number of contributing federal political committee. **C**

Name of Employer County of San Bernardino Occupation Public Safety Official

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt 12 / 06 / 2007
Transaction ID: SA11AI.5511
Amount of Each Receipt this Period 10.00
Payroll deduction

SUBTOTAL of Receipts This Page (optional) ► 30.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 23 / 36
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
San Bernardino County Safety Employees Benefit Association Federal PAC

A.	Full Name (Last, First, Middle Initial) Laren Leichter		Date of Receipt
	Mailing Address 735 E. Carnegie Dr. Ste. 125		<input type="text" value="12"/> / <input type="text" value="20"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	San Bernardino	CA	92408
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer County of San Bernardino		Occupation Public Safety Official	Transaction ID: SA11AI.5513
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="240.00"/>	Amount of Each Receipt this Period <input type="text" value="10.00"/>
			Payroll deduction

B.	Full Name (Last, First, Middle Initial) Roxanne Logan		Date of Receipt
	Mailing Address 735 E. Carnegie Dr. Ste. 125		<input type="text" value="11"/> / <input type="text" value="08"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	San Bernardino	CA	92408
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer County of San Bernardino		Occupation Public Safety Official	Transaction ID: SA11AI.5517
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="210.00"/>	Amount of Each Receipt this Period <input type="text" value="10.00"/>
			Payroll deduction

C.	Full Name (Last, First, Middle Initial) Roxanne Logan		Date of Receipt
	Mailing Address 735 E. Carnegie Dr. Ste. 125		<input type="text" value="11"/> / <input type="text" value="22"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	San Bernardino	CA	92408
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer County of San Bernardino		Occupation Public Safety Official	Transaction ID: SA11AI.5518
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="220.00"/>	Amount of Each Receipt this Period <input type="text" value="10.00"/>
			Payroll deduction

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="30.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 36
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
San Bernardino County Safety Employees Benefit Association Federal PAC

A. Full Name (Last, First, Middle Initial)
Roxanne Logan

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City San Bernardino State CA Zip Code 92408

FEC ID number of contributing federal political committee. **C**

Name of Employer County of San Bernardino Occupation Public Safety Official

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt 12 / 06 / 2007

Transaction ID: SA11AI.5519

Amount of Each Receipt this Period 10.00

Payroll deduction

B. Full Name (Last, First, Middle Initial)
Roxanne Logan

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City San Bernardino State CA Zip Code 92408

FEC ID number of contributing federal political committee. **C**

Name of Employer County of San Bernardino Occupation Public Safety Official

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 12 / 20 / 2007

Transaction ID: SA11AI.5520

Amount of Each Receipt this Period 10.00

Payroll deduction

C. Full Name (Last, First, Middle Initial)
Ken Lutz

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City San Bernardino State CA Zip Code 92408

FEC ID number of contributing federal political committee. **C**

Name of Employer County of San Bernardino Occupation Public Safety Official

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 11 / 08 / 2007

Transaction ID: SA11AI.5523

Amount of Each Receipt this Period 10.00

Payroll deduction

SUBTOTAL of Receipts This Page (optional) ► 30.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 36
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
San Bernardino County Safety Employees Benefit Association Federal PAC

A. Full Name (Last, First, Middle Initial)
Ken Lutz

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City San Bernardino State CA Zip Code 92408

FEC ID number of contributing federal political committee. **C**

Name of Employer County of San Bernardino Occupation Public Safety Official

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 22 / 2007

Transaction ID: SA11AI.5524

Amount of Each Receipt this Period 10.00

Payroll deduction

B. Full Name (Last, First, Middle Initial)
Ken Lutz

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City San Bernardino State CA Zip Code 92408

FEC ID number of contributing federal political committee. **C**

Name of Employer County of San Bernardino Occupation Public Safety Official

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt 12 / 06 / 2007

Transaction ID: SA11AI.5525

Amount of Each Receipt this Period 10.00

Payroll deduction

C. Full Name (Last, First, Middle Initial)
Ken Lutz

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City San Bernardino State CA Zip Code 92408

FEC ID number of contributing federal political committee. **C**

Name of Employer County of San Bernardino Occupation Public Safety Official

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 12 / 20 / 2007

Transaction ID: SA11AI.5526

Amount of Each Receipt this Period 10.00

Payroll deduction

SUBTOTAL of Receipts This Page (optional) ► 30.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 26 / 36
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
San Bernardino County Safety Employees Benefit Association Federal PAC

A.	Full Name (Last, First, Middle Initial) Colin McKenzie		Date of Receipt
	Mailing Address 735 E. Carnegie Dr. Ste. 125		<input type="text" value="10"/> / <input type="text" value="11"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	San Bernardino	CA	92408
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.5527
Name of Employer County of San Bernardino		Occupation Public Safety Official	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="380.00"/>	<input type="text" value="20.00"/>
			Payroll deduction

B.	Full Name (Last, First, Middle Initial) Colin McKenzie		Date of Receipt
	Mailing Address 735 E. Carnegie Dr. Ste. 125		<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	San Bernardino	CA	92408
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.5528
Name of Employer County of San Bernardino		Occupation Public Safety Official	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="400.00"/>	<input type="text" value="20.00"/>
			Payroll deduction

C.	Full Name (Last, First, Middle Initial) Colin McKenzie		Date of Receipt
	Mailing Address 735 E. Carnegie Dr. Ste. 125		<input type="text" value="11"/> / <input type="text" value="08"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	San Bernardino	CA	92408
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.5529
Name of Employer County of San Bernardino		Occupation Public Safety Official	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="420.00"/>	<input type="text" value="20.00"/>
			Payroll deduction

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="60.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 / 36
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
San Bernardino County Safety Employees Benefit Association Federal PAC

A. Full Name (Last, First, Middle Initial)
Colin McKenzie

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City San Bernardino State CA Zip Code 92408

FEC ID number of contributing federal political committee. **C**

Name of Employer County of San Bernardino Occupation Public Safety Official

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 440.00

Date of Receipt 11 / 22 / 2007

Transaction ID: SA11AI.5530

Amount of Each Receipt this Period 20.00

Payroll deduction

B. Full Name (Last, First, Middle Initial)
Colin McKenzie

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City San Bernardino State CA Zip Code 92408

FEC ID number of contributing federal political committee. **C**

Name of Employer County of San Bernardino Occupation Public Safety Official

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 460.00

Date of Receipt 12 / 06 / 2007

Transaction ID: SA11AI.5531

Amount of Each Receipt this Period 20.00

Payroll deduction

C. Full Name (Last, First, Middle Initial)
Colin McKenzie

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City San Bernardino State CA Zip Code 92408

FEC ID number of contributing federal political committee. **C**

Name of Employer County of San Bernardino Occupation Public Safety Official

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt 12 / 20 / 2007

Transaction ID: SA11AI.5532

Amount of Each Receipt this Period 20.00

Payroll deduction

SUBTOTAL of Receipts This Page (optional) ► 60.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 28 / 36
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
San Bernardino County Safety Employees Benefit Association Federal PAC

A. Full Name (Last, First, Middle Initial)
Dale Mondary

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City San Bernardino State CA Zip Code 92408

FEC ID number of contributing federal political committee. **C**

Name of Employer County of San Bernardino Occupation Public Safety Official

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt MM / DD / YYYY
11 / 08 / 2007

Transaction ID: SA11AI.5535

Amount of Each Receipt this Period 10.00

Payroll deduction

B. Full Name (Last, First, Middle Initial)
Dale Mondary

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City San Bernardino State CA Zip Code 92408

FEC ID number of contributing federal political committee. **C**

Name of Employer County of San Bernardino Occupation Public Safety Official

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt MM / DD / YYYY
11 / 22 / 2007

Transaction ID: SA11AI.5536

Amount of Each Receipt this Period 10.00

Payroll deduction

C. Full Name (Last, First, Middle Initial)
Dale Mondary

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City San Bernardino State CA Zip Code 92408

FEC ID number of contributing federal political committee. **C**

Name of Employer County of San Bernardino Occupation Public Safety Official

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt MM / DD / YYYY
12 / 06 / 2007

Transaction ID: SA11AI.5540

Amount of Each Receipt this Period 10.00

Payroll deduction

SUBTOTAL of Receipts This Page (optional) ► 30.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 / 36
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
San Bernardino County Safety Employees Benefit Association Federal PAC

A. Full Name (Last, First, Middle Initial)
Dale Mondary

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City San Bernardino State CA Zip Code 92408

FEC ID number of contributing federal political committee. **C**

Name of Employer County of San Bernardino Occupation Public Safety Official

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 12 / 20 / 2007
Transaction ID: SA11AI.5539
Amount of Each Receipt this Period 10.00
Payroll deduction

B. Full Name (Last, First, Middle Initial)
Dan Rice

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City San Bernardino State CA Zip Code 92408

FEC ID number of contributing federal political committee. **C**

Name of Employer County of San Bernardino Occupation Public Safety Official

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 11 / 08 / 2007
Transaction ID: SA11AI.5545
Amount of Each Receipt this Period 10.00
Payroll deduction

C. Full Name (Last, First, Middle Initial)
Dan Rice

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City San Bernardino State CA Zip Code 92408

FEC ID number of contributing federal political committee. **C**

Name of Employer County of San Bernardino Occupation Public Safety Official

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 22 / 2007
Transaction ID: SA11AI.5546
Amount of Each Receipt this Period 10.00
Payroll deduction

SUBTOTAL of Receipts This Page (optional) ► 30.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 30 / 36
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
San Bernardino County Safety Employees Benefit Association Federal PAC

A.

Full Name (Last, First, Middle Initial) Dan Rice		Date of Receipt MM / DD / YYYY 12 / 06 / 2007
Mailing Address 735 E. Carnegie Dr. Ste. 125		Transaction ID: SA11AI.5547
City San Bernardino	State CA	Zip Code 92408
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer County of San Bernardino	Occupation Public Safety Official	Payroll deduction
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	

B.

Full Name (Last, First, Middle Initial) Dan Rice		Date of Receipt MM / DD / YYYY 12 / 20 / 2007
Mailing Address 735 E. Carnegie Dr. Ste. 125		Transaction ID: SA11AI.5548
City San Bernardino	State CA	Zip Code 92408
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer County of San Bernardino	Occupation Public Safety Official	Payroll deduction
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

C.

Full Name (Last, First, Middle Initial) Kristen Riegel		Date of Receipt MM / DD / YYYY 11 / 08 / 2007
Mailing Address 735 E. Carnegie Dr. Ste. 125		Transaction ID: SA11AI.5552
City San Bernardino	State CA	Zip Code 92408
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer County of San Bernardino	Occupation Public Safety Official	Payroll deduction
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

SUBTOTAL of Receipts This Page (optional)	▶	30.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 31 / 36
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
San Bernardino County Safety Employees Benefit Association Federal PAC

A.

Full Name (Last, First, Middle Initial)
Kristen Riegel

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City San Bernardino State CA Zip Code 92408

FEC ID number of contributing federal political committee. **C**

Name of Employer County of San Bernardino Occupation Public Safety Official

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 22 / 2007

Transaction ID: SA11AI.5554

Amount of Each Receipt this Period 10.00

Payroll deduction

B.

Full Name (Last, First, Middle Initial)
Kristen Riegel

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City San Bernardino State CA Zip Code 92408

FEC ID number of contributing federal political committee. **C**

Name of Employer County of San Bernardino Occupation Public Safety Official

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt 12 / 06 / 2007

Transaction ID: SA11AI.5553

Amount of Each Receipt this Period 10.00

Payroll deduction

C.

Full Name (Last, First, Middle Initial)
Kristen Riegel

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City San Bernardino State CA Zip Code 92408

FEC ID number of contributing federal political committee. **C**

Name of Employer County of San Bernardino Occupation Public Safety Official

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 12 / 20 / 2007

Transaction ID: SA11AI.5555

Amount of Each Receipt this Period 10.00

Payroll deduction

SUBTOTAL of Receipts This Page (optional) ► 30.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 32 / 36
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
San Bernardino County Safety Employees Benefit Association Federal PAC

A. Full Name (Last, First, Middle Initial)
Dean Swan

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City San Bernardino State CA Zip Code 92408

FEC ID number of contributing federal political committee. **C**

Name of Employer County of San Bernardino Occupation Public Safety Official

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 11 / 08 / 2007
Transaction ID: SA11AI.5558
Amount of Each Receipt this Period 10.00
Payroll deduction

B. Full Name (Last, First, Middle Initial)
Dean Swan

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City San Bernardino State CA Zip Code 92408

FEC ID number of contributing federal political committee. **C**

Name of Employer County of San Bernardino Occupation Public Safety Official

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 22 / 2007
Transaction ID: SA11AI.5559
Amount of Each Receipt this Period 10.00
Payroll deduction

C. Full Name (Last, First, Middle Initial)
Dean Swan

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City San Bernardino State CA Zip Code 92408

FEC ID number of contributing federal political committee. **C**

Name of Employer County of San Bernardino Occupation Public Safety Official

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt 12 / 06 / 2007
Transaction ID: SA11AI.5560
Amount of Each Receipt this Period 10.00
Payroll deduction

SUBTOTAL of Receipts This Page (optional) ► 30.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 33 / 36
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
San Bernardino County Safety Employees Benefit Association Federal PAC

A. Full Name (Last, First, Middle Initial)
Dean Swan

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City San Bernardino State CA Zip Code 92408

FEC ID number of contributing federal political committee. **C**

Name of Employer County of San Bernardino Occupation Public Safety Official

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 12 / 20 / 2007

Transaction ID: SA11AI.5561

Amount of Each Receipt this Period 10.00

Payroll deduction

B. Full Name (Last, First, Middle Initial)
Russell Weart

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City San Bernardino State CA Zip Code 92408

FEC ID number of contributing federal political committee. **C**

Name of Employer County of San Bernardino Occupation Public Safety Official

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 11 / 08 / 2007

Transaction ID: SA11AI.5564

Amount of Each Receipt this Period 10.00

Payroll deduction

C. Full Name (Last, First, Middle Initial)
Russell Weart

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City San Bernardino State CA Zip Code 92408

FEC ID number of contributing federal political committee. **C**

Name of Employer County of San Bernardino Occupation Public Safety Official

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 22 / 2007

Transaction ID: SA11AI.5565

Amount of Each Receipt this Period 10.00

Payroll deduction

SUBTOTAL of Receipts This Page (optional) ► 30.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 34 / 36
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
San Bernardino County Safety Employees Benefit Association Federal PAC

A. Full Name (Last, First, Middle Initial)
Russell Weart

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City State Zip Code
San Bernardino CA 92408

FEC ID number of contributing federal political committee. **C**

Name of Employer County of San Bernardino Occupation Public Safety Official

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt
Transaction ID: SA11AI.5566

Amount of Each Receipt this Period 10.00

Payroll deduction

B. Full Name (Last, First, Middle Initial)
Russell Weart

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City State Zip Code
San Bernardino CA 92408

FEC ID number of contributing federal political committee. **C**

Name of Employer County of San Bernardino Occupation Public Safety Official

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
Transaction ID: SA11AI.5567

Amount of Each Receipt this Period 10.00

Payroll deduction

SUBTOTAL of Receipts This Page (optional) ►

TOTAL This Period (last page this line number only) ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 35 / 36

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

San Bernardino County Safety Employees Benefit Association Federal PAC

A.

Full Name (Last, First, Middle Initial)

Friends of Joe Baca

Mailing Address P.O. Box 362

City San Bernardino State CA Zip Code 92402

Purpose of Disbursement
Campaign Contribution

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: CA District: 43

Transaction ID: SB23.5568

Date of Disbursement

^M 1	^M /	^D 0	^D 7	/	^Y 2	^Y 0	^Y 0	^Y 7
----------------	----------------	----------------	----------------	---	----------------	----------------	----------------	----------------

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional) ►

500.00

TOTAL This Period (last page this line number only) ►

500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 36 / 36

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

San Bernardino County Safety Employees Benefit Association Federal PAC

A.

Full Name (Last, First, Middle Initial)

Smith Marion & Co.

Transaction ID: SB29.5578

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	5		2	0	0	7

Mailing Address 22365 Barton Rd., Ste. 108

City State Zip Code
Grand Terrace CA 92313

Amount of Each Disbursement this Period

100.00

Purpose of Disbursement
Professional Services

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

100.00

TOTAL This Period (last page this line number only)

100.00